

Chromoblastomycosis: a neglected disease

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Neglected tropical diseases (NTDs) include a series of tropical and subtropical endemic diseases worldwide. They usually affect individuals living in low-income regions of Asia, Africa, and Latin America. NTDs affect populations with little political voice and low visibility. According to the World Health Organization (WHO), the prevalence of NTDs is linked to poverty and social fragility. Those who suffer the most from NTDs are the most impoverished populations, often living in remote rural areas, urban slums, and areas of conflict. With little health care attention and political support, NTDs are not under the radar of public health systems, nor are they part of their priorities. Several endemic diseases, including diseases caused by helminths, protozoa, bacteria, and viral infections, except for fungal diseases, are defined as “neglected diseases” by the WHO¹. Recently, we received a case

of advanced chromoblastomycosis (CMB) in our service. The state of progression of the disease motivated us to write this letter due to our great concern regarding the assistance of patients affected by this disease in our country. Our patient was a male, 54 years old, coming from a rural area in the North Region of the country who reported having a lesion in the right leg, in progression for 25 years; he had never had access to medical treatment for this condition. The limb affected was already completely disabled at the time of service. It worries us to find such serious cases in our country still because this is an important endemic mycosis, with affordable diagnosis and that requires treatment in the early stages because it can lead to patient disability². CMB remains a prevalent disease in Brasil and is endemic in many areas, especially in the Northern Region, where 872 cases have been reported

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FIGURE 1. SIDE VIEW OF THE RIGHT LEG OF A PATIENT AFFECTED BY CBM.

in recent decades. Such cases exemplify the neglect faced by patients with this condition in Brasil. CMB is a chronic fungal infection of the skin and subcutaneous tissue caused by the transcutaneous traumatic inoculation of a specific group of dermal fungi that occur mainly in tropical and subtropical areas of the world. It affects mainly men who are rural workers, and it has been increasingly found among other types of professionals. The fungus penetrates the skin after inoculation, and the agent most frequently isolated is the *Fonsecaea pedrosoi*. When left undiagnosed in the early stages, patients with CBM require prolonged treatments with systemic antifungal agents, sometimes associated with physical methods that are not always effective³. CBM is one of the most prevalent fungal infections worldwide, and it is the most common pathology among diseases caused by melanocyte fungi. CBM must be considered a neglected disease, because if on the one hand, poverty and limited access to health care contribute to the permanence of serious cases such as this, its effects perpetuate the condition of poverty and inequality in endemic areas, in a cyclic dynamic. CBM makes those affected disabled to work, which entails economic consequences. Its overall burden is comparable or greater than that of mycetoma and, like mycetoma, it is basically an occupational fungal disease. Due to its global prev-



FIGURE 2. TOP VIEW OF THE RIGHT LEG OF A PATIENT AFFECTED BY CBM.

alence, its impact on poverty, and its resistance, this condition must be considered an actual neglected disease, at least in our country, even if not recognized as such by the WHO, so that we can prevent other cases like this⁴.

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